

O.C.  
16/24  
AG

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS	66621	9/19
O.I.P.E. CLASSIFIER		19	52700
FORMALITY REVIEW	H A	858	10-20-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 0 ..... Objected

Claim	Date
Final	Original
1	✓ ✓ 8/8/01
2	✓ ✓
3	✓ ✓
4	✓ ✓
5	0 0
6	0 0
7	0 0
8	0 0
9	0 0
10	0 0
11	0 ✓
12	0 ✓
13	✓ ✓
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Claim	Date
Final	Original
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Claim	Date
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AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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